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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/538,474	06/07/2005	Andreas Wolfert	272974US0PCT	2264
	7590 01/07/2009 I, SPIVAK, MCCLELLAND MAIER & NEUSTADT, P.C.		EXAMINER	
1940 DUKE STREET ALEXANDRIA, VA 22314		PUTTLITZ, KARL J		
ALEAANDKIA	A, VA 22514		ART UNIT PAPER NUMBER	
			1621	
			NOTIFICATION DATE	DELIVERY MODE
			01/07/2009	ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

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Interview Summary	10/538,474	74 WOLFERT ET AL.	
interview Summary	Examiner	Art Unit	
	KARL J. PUTTLITZ	1621	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>KARL J. PUTTLITZ</u> .	(3)		
(2) <u>David Stitzel</u> .	(4)		
Date of Interview: 30 December 2008.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	2)∏ applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>NA</u> .			
Identification of prior art discussed: <u>NA</u> .			
Agreement with respect to the claims f) was reached. g)∏ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Applicant indicated that reaction</u> .			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached.	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTERPOLITIES ON REVERSE SIDE OF ON Attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APP / DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
/Karl J. Puttlitz/			

Application No.

Applicant(s)